

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective December 8, 2004

10/800 446

CLAIMS AS FILED - PART I

|                                  | (Column 1)   | (Column 2)               |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS                     |              |                          |
| FOR                              | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | minus 20 = * |                          |
| INDEPENDENT CLAIMS               | minus 3 = *  |                          |
| MULTIPLE DEPENDENT CLAIM PRESENT |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

Amend  
10/11/05

CLAIMS AS AMENDED - PART II

| AMENDMENT   | (Column 1)                                | (Column 2) | (Column 3)                                  |
|---|---|------------|---|
|   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |            | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |
| Total   | * 9                                       | Minus      | + 20 = /                                    |
| Independent   | * 2                                       | Minus      | *** 3 = /                                   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |            |   |

SMALL ENTITY  
TYPE

| OR        | RATE   | FEES | OR        | RATE   | FEES |
|-----------|--------|------|-----------|--------|------|
| BASIC FEE | 150.00 |      | BASIC FEE | 300.00 |      |
| X\$ 25 =  |        |      | X\$50 =   |        |      |
| X100 =    |        |      | X200 =    |        |      |
| +180 =    |        |      | +360 =    |        |      |
| TOTAL     |        |      | TOTAL     |        |      |

OTHER THAN  
SMALL ENTITY

| OTHER THAN<br>SMALL ENTITY | SMALL ENTITY | OR                     | OTHER THAN<br>SMALL ENTITY |                        |
|----------------------------|--------------|------------------------|----------------------------|------------------------|
|                            | RATE         | ADDI-<br>TIONAL<br>FEE | RATE                       | ADDI-<br>TIONAL<br>FEE |
| X\$ 25 =                   |              |                        | X\$50 =                    |                        |
| X100 =                     |              |                        | X200 =                     |                        |
| +180 =                     |              |                        | +360 =                     |                        |
| TOTAL<br>ADDT. FEE         |              |                        | TOTAL<br>ADDT. FEE         |                        |

| AMENDMENT B   | (Column 1)                                | (Column 2) | (Column 3)                                  |
|---|---|------------|---|
|   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |            | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |
| Total   | * *                                       | Minus      | ** =  |
| Independent   | * *                                       | Minus      | *** =                                       |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |            |   |

| RATE               | ADDI-<br>TIONAL<br>FEE | OR | RATE               | ADDI-<br>TIONAL<br>FEE |
|--------------------|------------------------|----|--------------------|------------------------|
| X\$ 25 =           |                        |    | X\$50 =            |                        |
| X100 =             |                        |    | X200 =             |                        |
| +180 =             |                        |    | +360 =             |                        |
| TOTAL<br>ADDT. FEE |                        |    | TOTAL<br>ADDT. FEE |                        |

| AMENDMENT C   | (Column 1)                                | (Column 2) | (Column 3)                                  |
|---|---|------------|---|
|   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |            | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |
| Total   | * *                                       | Minus      | ** =  |
| Independent   | * *                                       | Minus      | *** =                                       |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |            |   |

| RATE     | ADDI-<br>TIONAL<br>FEE | OR | RATE    | ADDI-<br>TIONAL<br>FEE |
|----------|------------------------|----|---------|------------------------|
| X\$ 25 = |                        |    | X\$50 = |                        |
| X100 =   |                        |    | X200 =  |                        |
| +180 =   |                        |    | +360 =  |                        |